

07/60/01

J1054
US
PTO

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PTO/SB/05 (11-00)

Please type a plus sign (+) inside this box → Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	P-14 (n) CIP/CONT
First Inventor	Wayne Anderson, et al.
Title	Improved Hand/Survival Tool.
Express Mail Label No.	EL 133 330 387US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages **39**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets **21**]
5. Oath or Declaration [Total Pages **2**]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. attachment incorporated
17. Other: reference including

18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-In-part (CIP) of prior application No.: **09, 237,557**
Prior application information: Examiner **Debra Meislin** Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)			<input type="checkbox"/> or <input checked="" type="checkbox"/> Correspondence address below
Name	Marvin Feldman			
Address	Lackenbach Siegel One Chase Road			
City	Scarsdale	State	NY	Zip Code
Country	US	Telephone	(914) 723-4300	Fax

Name (Print/Type)	Marvin Feldman	Registration No. (Attorney/Agent)	25,797
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Signature		Date	July 9, 2001
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JC903 09/01
09/01/01
07/09/01

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known

Application Number	
Filing Date	7/9/2001
First Named Inventor	Wayne Anderson, et al
Examiner Name	Debra Meislin
Group Art Unit	3723
Attorney Docket No.	P-14 (n) CIP/CONT

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name **10-0100**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$) Fee Code (\$) Fee Description

Fee Paid

101	710	201	355	Utility filing fee	\$355
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$ 355)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Claims	- 3** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Multiple Dependent			= <input type="text"/>

Large Entity Small Entity

Fee Code (\$) Fee Code (\$) Fee Description

103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 355)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to Institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY	Complete if applicable		
Name (Print/Type)	Marvin Feldman	Registration No. (Attorney/Agent)	25,797
Signature	Telephone (914-723-4300)		
	Date	July 9, 2001	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

ASSISTANT COMMISSIONER OF PATENTS
WASHINGTON, D.C. 20231

Sir: **TRANSMITTED HEREWITH FOR FILING IS A
U.S. PATENT APPLICATION FOR:**

Inventor(s): Wayne Anderson et al.

**Title: Improved Hand/Survival Tool Having Multiple
Implements**

Attorney Docket No.: P-14 CONT/CIP

Enclosed are:

- [X] Specification, claims, Abstract
- [X] 21 sheet(s) of drawings
 - X FORMAL INFORMAL
- [] An Assignment of the Invention
- [X] A Declaration and Power of Attorney (unsigned; signed Declaration to follow)
- [X] A Verified Statement to establish small entity status under 37 CFR 1.9 and 34 CFR 1.27 – will follow.
- [] Priority is claimed Priority document(s) is [] ENCLOSED [] NOT ENCLOSED.

The filing fee has been calculated as shown below:

FOR	NO. FILED	NO. EXTRA
Basic Fee		
Total Claims	57 - 20 =	37
Indep Claims	5 - 3 =	2
<input type="checkbox"/> Multiple Dependent Claim Presented: No.		

Fee for extra claims: \$ 0

SMALL ENTITY	
RATE	FEES
	\$ 380.00
\$9.00	\$ 333.00
\$39.00	\$ 78.00
	\$
	\$
TOTAL	\$ 791.00

LARGE ENTITY	
RATE	FEES
	\$790.00
	\$
	\$
	\$
	\$
TOTAL	\$ 790.00

- [] Please charge my Deposit Account No. 10-0100 in the amount of \$ A duplicate copy of this sheet is enclosed.
- [X] A check in the amount of \$791.00 to cover the filing fee will follow.
*Check does not include \$40.00 assignment recording fee.
- [] The Commissioner is hereby authorized to charge payment of the fees associated with this communication and during the pendency of this application, such as an extension or issue fee if mistakenly not paid or insufficient, and/or any other fee due but not paid by check, etc., or credit any overpayment to Deposit Account No. 10-0100. A duplicate copy of this sheet is enclosed.

Dated: January 26, 1999
One Chase Road
Scarsdale, NY 10583
(914) 723-4300

Enclosed for filing under X 35 USC 111 or 35 USC 371

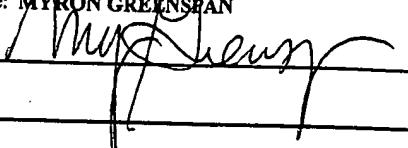
Certificate of Mailing By "Express Mail"
"Express Mail" Mailing Label No.

EL 133 325 824 US

Date of Deposit: January 26, 1999

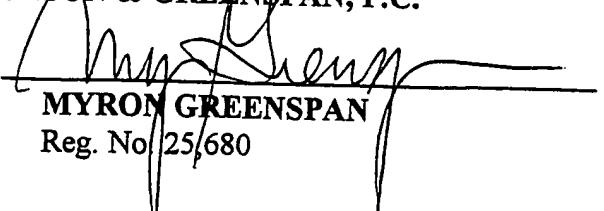
I hereby certify that this paper or fee is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" under 37 C.F.R. § 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Print Name: MYRON GREENSPAN

Signature: 



LACKENBACH SIEGEL MARZULLO
ARONSON & GREENSPAN, P.C.

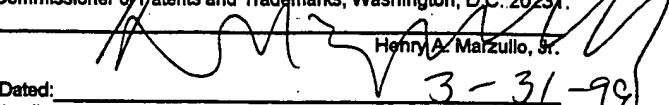
BY: 

MYRON GREENSPAN
Reg. No. 25/680

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231.


Henry A. Marzullo, Sr.

Dated: 3-31-99
Applicant hereby petitions that any and all extensions of the term necessary to render this response timely be granted. Costs for such extension(s) and or any other fee due with this paper, not fully covered by an enclosed check may be charged to Deposit Account #10-0100.

Inventors: Wayne Anderson

Serial No.: 09/237,557

Filing Date: 1/26/99

Examiner:

Art. Unit: 3723

Title: IMPROVED HAND/SURVIVAL TOOL HAVING MULTIPLE IMPLEMENTS

Docket No.: P- 14CONT/CIP

Assistant Commissioner of Patents
Washington, D.C. 20231

RESPONSE TO NOTICE TO FILE MISSING PARTS

Sir:

In reply to the official communication mailed February 11, 1999

in the above patent application, applicants enclose herewith both an executed Declaration and Power of Attorney and a Declaration Claiming Small Entity Status.

A check in the amount of \$791.00, payable to the Commissioner of

JC903 U.S. PTO
09/901305
07/09/01



Patents and Trademarks, is enclosed and includes the Government Filing Fee
of \$380; \$333 for 37 additional dependent claims and \$78 for 2 additional
independent claims. We are also enclosing a copy of this/notice. The \$65
Government Surcharge fee for late filing of the Declaration and Small Entity
Declaration is to be charge to the undersigned attorney's Deposit Account
Number 10-0100. A duplicate copy of this page is attached for such purpose.

In the event that a charge or credit is to be made relative to this subject
patent application, then same may also be charged or credited to the
attorney's Deposit Account No. 10-0100.

Accordingly, we await confirmation of the above-mentioned enclosures.

Respectfully submitted,

LACKENBACH SIEGEL MARZULLO
ARONSON & GREENSPAN

BY: _____

HENRY A. MARZULLO, JR.
Reg. No. 20,910

Dated: 3 - 31 - 99
One Chase Road
Scarsdale, New York 10583
914-723-4300

V & C DOCKET

FEB 26 1999



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

By

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
NS/203, FEB 26 1999	ANDREW J. ANDREW		PROFESSIONAL INC.

LACKENBACH SIEBEL MARZLICHC ARONSON &
GREENSPAN
PENTHOUSE SUITE
ONE CHASE ROAD
SCARSDALE NY 10583

NOT ASSIGNED

07/20

DATE MAILED:

02/23/1999

JC903 U.S. PTO
09/901305
07/09/01

NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a
 small entity (statement filed) non-small entity is \$ 712.00.

1. The statutory basic filing fee is:

- missing.
 insufficient.

Applicant must submit \$ 760.00 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. Additional claim fees of \$ _____, including any multiple dependent claim fees, are required.

\$ 156 for 2 independent claims over 3.

\$ 1664 for 37 dependent claims over 20.

\$ _____ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

- is missing or unexecuted.
 does not cover the newly submitted items.
 does not identify the application to which it applies.
 does not include the city and state or foreign country of applicant's residence.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application does not comply with the Sequence Rules.

See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."

9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the reply.

Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY

Best Way

Honorable Commissioner of Patents
and Trademarks
Washington, D.C. 20231

Inventor: ANDERSON et al.
Docket No.: P-14 CONT/CIP
Serial No.: _____
Resp. Due: _____
Date Sent: 1/26/99

Sir:

Kindly acknowledge receipt of the accompanying

- | | | |
|--|---|--|
| <input type="checkbox"/> _____ Month(s) Ext. of Time | <input checked="" type="checkbox"/> New Application | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Amendment | <input checked="" type="checkbox"/> Check | <input type="checkbox"/> Assignment |
| <input type="checkbox"/> Response | <input type="checkbox"/> Base Issue Fee | <input checked="" type="checkbox"/> Other <u>21 sheets</u> |
| <input type="checkbox"/> Response to Final | <input type="checkbox"/> Balance Issue Fee | <u>of formal</u> |
| <input type="checkbox"/> Appeal Brief | <input type="checkbox"/> Priority Documents | <u>drawings +</u> |
| <input type="checkbox"/> 37 CFR 1.8(a) Cert. <u>EL</u> | <input type="checkbox"/> Discl. Statement | <u>unsigned Deal,</u> |
| <input checked="" type="checkbox"/> 37 CFR 1.10 Cert. (No. <u>133 325 824 US</u>) | | |

by placing your receiving date stamp hereon and mailing.

Post card as
Mild

Honorable Commissioner of Patents
and Trademarks
Washington, D.C. 20231

Washington, D.C. 20231

Siri

Kindly acknowledge receipt of the accompanying

Inventor: W. Anderson^{etc}
Docket No. P-14cont/cip
Serial No.: 09/237,557
Resp. Due: 4-11-47
Date Sent: _____